B22C (Official Form 22C) (Chapter 13) (01/08)	Document Fage 1 of 7
In re ELLIS R_ AND KIMBERLY A_ MEDLIN  Debtor(s)	According to the calculations required by this statement:  The applicable commitment period is 3 years.  The applicable commitment period is 5 years.
Case number: (If known)	☑ Disposable income is determined under § 1325(b)(3).
,	☐ Disposable income is not determined under § 1325(b)(3).
	(Check the boxes as directed in Lines 17 and 23 of this statement.)

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## CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

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		Part	I. REPORT (	OF INCOM	ME		
	а. 🔲 し	al/filing status. Check the box that applies a Inmarried. Complete only Column A ("Debto Married. Complete both Column A ("Debtor	or's Income") fo	r Lines 2-10.			
1	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six month total by six, and enter the result on the appropriate line.					Column A Debtor's Income	Column B Spouse's Income
2	Gross	wages, salary, tips, bonuses, overtime, co	ommissions.			\$6,145.50	\$3,792.32
3	Income from the operation of a business, profession, or farm.  Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero.  Do not include any part of the business expenses entered on Line b as a deduction in Part IV.						
	a.	Gross receipts		0.00		]	
	b.	Ordinary and necessary business expenses		0.00		]	
	C.	Business income	S	Subtract Line I	b from Line a	\$0.00	\$0.00
4	Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV.  4 a. Gross receipts \$1,425.00				1		
	b.	Ordinary and necessary operating expenses	6	\$1,425.00	0	11	
	C.	Rent and other real property income		Subtract	Line b from Line a	\$0.00	\$0.00
5	Interes	t, dividends, and royalties.				\$0.00	\$0.00
6	Pensio	on and retirement income.				\$0.00	\$0.00
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses the debtor or the debtor's dependents, including child support paid for that purpose.  Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.  \$0.00 \$0.00					\$0.00	
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8.  However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act  Debtor \$0.00  Spouse \$0.00					\$0.00	\$0.00

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payment paid by your spouse, but include all other payments of alimony or separate maintenance.  Do not include any benefits received under the Social Security Act or payments received as a victim of against humanity, or as a victim of international or domestic terrorism.	S		
	a. 0			
	b. 0			
			\$0.00	\$0.00
10	<b>Subtotal.</b> Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).		\$6,145.50	\$3,792.32
11	<b>Total.</b> If column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		\$9	9,937.82

	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD				
12	Enter the amount from Line 11.				
13	<b>Marital adjustment.</b> If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.				
	a. \$0.00				
	b. \$0.00				
	c. \$0.00	\$0.00			
14	Subtract Line 13 from Line 12 and enter the result.	\$9,937.82			
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$119,253.84			
16	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <a href="https://link.org/link.org/link.org/link.org/">ILLINOIS</a> b. Enter debtor's household size: <a href="https://www.usdoj.gov/ust/">5</a>	\$85,082.00			
17	Application of § 1325(b)(4). Check the applicable box and proceed as directed.  The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement.  The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement.				

18	Enter the amount from Line 11.		\$9,937.82
	income listed in Line 10, Column E the debtor's dependents. Specify i the spouse's tax liability or the spo	married, but are not filing jointly with your spouse, enter on Line 19 the total of any B that was NOT paid on a regular basis for the household expenses of the debtor or in the lines below the basis for excluding the Column B income (such as payment of buse's support of persons other than the debtor or the debtor's dependents) and each purpose. If necessary, list additional adjustments on a separate page. If the	
19	conditions for entering this adjustr	ment do not apply, enter zero.	
19	conditions for entering this adjustr	ment do not apply, enter zero. \$0.00	
19	-		
19	a.	\$0.00	
19	a. b.	\$0.00 \$0.00	\$0.00

B22C (Official Form 22C) (Chapter 13) (01/08) - con OCUMENT 3 Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result. \$119,253.84 22 Applicable median family income. Enter the amount from Line 16. \$85,082.00 Application of § 1325(b)(3). Check the applicable box and proceed as directed. ☐ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. 23 The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts IV, V, or VI. Part IV. CALCULATION OF DEDUCTIONS ALLOWED FROM INCOME Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable 24A household size. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) \$1,632.00 National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total 24B health care amount, and enter the result in Line 24B. Household members under 65 years of age Household members 65 years of age or older Allowance per member \$57.00 Allowance per member \$144.00 a2. a1 Number of members 5 Number of members 0 h1 b2. Subtotal Subtotal \$285.00 c2. \$0.00 c1 \$285.00 Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the 25A IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). \$553.00 Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. 25B IRS Housing and Utilities Standards; mortgage/rent Expense \$1,520.00 Average Monthly Payment for any debts secured by your b. home, if any, as stated in Line 47 \$3,028.85 Net mortgage/rental expense Subtract Line b from Line a. \$0.00 Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: 26

\$0.00

27A	Local Standards: transportation; vehicle operation/public transportation expense.  You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7.   If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards:  Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		
27B	Local Standards: transportation; additional public transportation expense.  If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		
28	Local Standards: transportation ownership/lease expense; Vehicle of vehicles for which you claim an ownership/lease expense. (You may reform more than two vehicles.)   □ 1 □ 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter Payments for any debts secured by Vehicle 1, as stated in Line 47; subtraction 28. Do not enter an amount less than zero.  □ IRS Transportation Standards, Ownership Costs □ Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	not claim an ownership/lease expense  B Local Standards: Transportation (available in Line b the total of the Average Monthly	
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$63.08
29	Local Standards: transportation ownership/lease expense; Vehicle only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter Payments for any debts secured by Vehicle 2, as stated in Line 47; subtraction 29. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2	S Local Standards: Transportation (available in Line b the total of the Average Monthly	\$0.00
30	Other Necessary Expenses: taxes. Enter the total average month for all federal, state and local taxes, other than real estate and sales taxe taxes, social security taxes, and Medicare taxes. Do not include real		\$1,813.53
31	Other Necessary Expenses: involuntary deductions for employmen that are required for your employment, such as mandatory retirement co Do not include discretionary amounts, such as voluntary 401(k) cor	ntributions, union dues, and uniform costs.	\$66.75
32	Other Necessary Expenses: life insurance. Enter total average may for term life insurance for yourself. Do not include premiums for for whole life, or for any other form of insurance.	nonthly premiums that you actually insurance on your dependents,	\$0.00
33	Other Necessary Expenses: court-ordered payments. Enter the to pay pursuant to the order of a court or administrative agency, such as Do not include payments on past due obligations included in Line 4		\$0.00
34	Other Necessary Expenses: education for employment or for a physical challenged child. Enter the total average monthly amount that you act condition of employment and for education that is required for a physical child for whom no public education providing similar services is available	ually expend for education that is a ly or mentally challenged dependent	\$0.00
35	Other Necessary Expenses: childcare. Enter the total average mo on childcare such as baby-sitting, day care, nursery and preschool.	nthly amount that you actually expend  Do not include other educational payments.	\$0.00

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36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B.  Do not include payments for health insurance listed or health savings accounts listed in Line 39.		
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.		
38	Total Expenses Allowed under IRS Standards. Enter the total of	f Lines 24 through 37.	\$5,117.36
	Subpart B: Additional Living Note: Do not include any expenses tha	g Expense Deductions t you have listed in Lines 24-37	·
	Health Insurance, Disability Insurance, and Health Savings Accourthe categories set out in lines a-c below that are reasonably necessary		
	a. Health Insurance	\$0.00	
	b. Disability Insurance	\$0.00	
39	c. Health Savings Account	\$0.00	
39	Total and enter on Line 39		\$0.00
	If you do not actually expend this total amount, state your actual to space below:  \$0.00	otal average monthly expenditures in the	
40	Continued contributions to the care of household or family memb monthly expenses that you will continue to pay for the reasonable and elderly, chronically ill, or disabled member of your household or member unable to pay for such expenses. Do not include payments listed in	necessary care and support of an er of your immediate family who is	\$0.00
Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			\$0.00
42	Home energy costs. Enter the average monthly amount, in excess Local Standards for Housing and Utilities, that you actually expend for You must provide your case trustee with documentation of your armust demonstrate that the additional amount claimed is reasonable.	home energy costs. ctual expenses, and you	\$0.00
43	actually incur, not to exceed \$137.50 per child, for attendance at a priv	ovide your case trustee with documentation	\$290.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards,		
45	Charitable contributions. Enter the amount reasonably necessary contributions in the form of cash or financial instruments to a charitable § 170(c)(1)-(2). Do not include any amount in excess of 15% of y	•	\$0.00
46	Total Additional Expense Deductions under § 707(b). Enter the	total of Lines 39 through 45.	\$290.00
	Subpart C: Deductions f	or Neht Payment	ı
	Subpart C. Deductions I	or Dent I ayment	

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	•	, , ,	, ,	•		
	own, lis whethe contrac	er the payment includes to ctually due to each Secur	claims. For each of your debts that is or, identify the property securing the debt, axes or insurance. The Average Monthly land Creditor in the 60 months following the or on a separate page. Enter the total of the	state the Average Mor Payment is the total of filing of the bankrupto	onthly Payment, and check all amounts scheduled as by case, divided by 60. If	
		Name of Creditor	Property Securing the Debt	Average Payment	Does payment include taxes or insurance?	
47	a.	Chase	Marital Residence	\$2,523.53	☐ Yes 🛛 No	
	b.	Chase	Marital Residence	\$505.32	☐ Yes ☒ No	
	C.	American Home Mort	Rental Home	\$1,425.00	✓ Yes □ No	
	d.	Credit Union 1	2003 Ford Expedition	\$269.75	Yes No	
	e.		111111111111111111111111111111111111111	\$0.00	Yes No	
		•		Total: Add Lines a - e		\$4,723.60
48	in addi amoun	tion to the payments liste t would include any sums	ion 1/60th of any amount (the "cure amound in Line 47, in order to maintain possess in default that must be paid in order to a sin the following chart. If necessary, list and Property Securing the Debt  Marital Residence  Martial Status	ion of the property. The void repossession or fo	e cure oreclosure. eparate page.	
	c.			\$0.00		
	d.			\$0.00		\$131.52
	e.			\$0.00		ψ.σσ <u>-</u>
				Total: Add Lir	nes a - e	
49	as prio		rity claims. Enter the total amount, a alimony claims, for which you were liable tions, such as those set out in Line 33.	at the time of your ba		\$0.00
	_	er 13 administrative exp		by the amount in Line	b, and	
	a.	Projected average mon	nthly Chapter 13 plan payment.	\$0.00		
50	b.	issued by the Executive	our district as determined under schedules e Office for United States Trustees. uilable at <u>www.usdoj.gov/ust/</u> or from the court.)			
	C.	Average monthly admir	nistrative expense of Chapter 13 case	Total: Multiply Line	es a and b	\$0.000
51	Total [	Deductions for Debt Pay	yment. Enter the total of Lines 47 throu	ugh 50.		\$4,855.12
			Subpart D: Total Deductio	ns from Income		
52	Total	of all deductions from i				\$10,262.48

	Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)				
53	Total current monthly income. Enter the amount from Line 20.				
54	<b>Support income.</b> Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.	\$0.00			
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).	\$0.00			
56	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.	\$10,262.48			

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	there is necessary	on for special circumstances. If there are special circumstances and reasonable alternative, describe the special circumstances are are, list additional entries on a separate page. Total the expenses at provide your case trustee with documentation of these explanation of the special circumstances that make such explanation.	s and enter the total in Line 57.  xpenses and you must provide a		
57		Nature of special circumstances	Amount of expense		
	a.		\$0.00		
	b.		\$0.00		
	C.		\$0.00		
			Total: Add Lines a, b, and c	\$0.00	
58		djustments to determine disposable income. Add the arer the result.	mounts on Lines 54, 55, 56, and 57	\$10,262.48	
59	Monthl result.	Disposable Income Under § 1325(b)(2). Subtract Line 58	from Line 53 and enter the	(\$324.66)	
		Part VI: ADDITIONAL EX	KPENSE CLAIMS		
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.  Expense Description  Monthly Amount				
60	a.	Expense Boompton	\$0.00		
	b.		\$0.00		
	D.		ΨΟ.ΟΟ		

		Part VII: VERIFICATION
61	I declare under penalty of pe both debtors must sign.) Date: 10/27/2008	erjury that the information provided in this statement is true and correct. (If this a joint case,  Signature: /s/ Ellis R. Medlin Jr.
01	Date: 10/27/2008	(Debtor) Signature: /s/ Kimberly A. Medlin (Joint Debtor, if any)

Total: Add Lines a, b, and c

\$0.00 \$0.00